NIAID POLICY: MONITORING GRANTS SUPPORTING CLINICAL TRIALS AND STUDIES

(Single Site, Multi-Center or Multi-National Clinical Trial/Research)

The National Institute of Allergy and Infectious Diseases (NIAID) supports clinical trials and studies and must ensure compliance with law and government regulations including procedures to protect the safety of all participants. To assist the NIAID and investigators in properly monitoring studies, additional information beyond what is normally submitted with a competitive grant application and the annual noncompetitive renewal application is required.

Applicants for clinical trials and studies must take these policies into consideration in the preparation of their applications. Awardees must meet adhere to <u>terms of award</u> that will be incorporated in their notice of grant award. Potential applicants are encouraged to contact NIAID concerning this policy.

NIAID terms of award are presented below; they delineate awardee responsibilities including submission of the required documentation to NIAID. These terms apply to all NIAID-supported clinical research including: Patient-Oriented Research including the development of new technologies using human subjects or materials derived from patients or volunteers, studies into the mechanisms of human disease using patient or volunteer samples, therapeutic interventions, clinical trials, and any studies that require IRB approval to collect samples from patients or volunteers; Epidemiologic and Behavioral Studies; and Outcomes and Health Services Research. The terms of award delineate specific time lines for approvals related to the initiation of the trial or study and time lines for reporting events related to the progress of the trial or study. It is the responsibility of the awardee to send the requested documentation and/or information to NIAID according to these time lines.

NIAID-supported clinical research must adhere to all appropriate human subjects requirements. NIH information and guidance on human subject protection, informed consent, and IRB review can be found at http://grants.nih.gov/grants/oprr/library_human.htm. Within that site is a link to FDA INFORMATION SHEETS Guidance for Institutional Review Boards and Clinical Investigators at: http://www.fda.gov/oc/oha/IRB/toc.html. All clinical research projects must comply with the universally accepted principles of Good Clinical Practice (GCP) as outlined in Title 21 of the CFR (http://www.access.gpo.gov/nara/cfr/waisidx_99/21cfr312_99.html). International studies must adhere to the above-cited regulations or the International Congress on Harmonization's Guidelines to Good Clinical Practice (http://www.ifpma.org/pdfifpma/e6.pdf).

INQUIRIES

General inquiries related to this notice may be directed to:

Office of the Director Division of Extramural Activities, NIAID

Telephone: (301) 496-7291 FAX: (301) 402-0369

E-mail: ac20a@nih.gov or jm80c@nih.gov

Inquiries about a specific grant should be directed to the NIAID Program Officer for that grant.

Terms of Award

These Terms of Award are in addition to and not in lieu of other NIH grant administration policies, such as written assurance of compliance with the Office of Protection from Research Risks regulations (45 CFR 46), PHS guidelines, HHS grant administration regulations (45 CFR parts 74 and 92), and Office of Management and Budget administrative guidelines.

In accordance with Department of Health and Human Services regulations for the protection of human subjects (45 CFR 46) and ensuring objectivity in research (42 CFR 50, Subpart F), Terms of Award details the agreements between the National Institute of Allergy and Infectious Diseases (NIAID) and (Name of Grantee Institution, Grant Number, and Principal Investigator [PI]) for the conduct of all clinical research, studies or trials supported by (Grant Title and Number).

NIAID Point of Contact:

All information and documentation requested by NIAID in this document must be forwarded electronically or by mail to the following address:

TERMS OF AWARD FOR NIAID GRANTS COORDINATOR (specific NIAID staff member will be assigned for each award)
Division of XXXXXX
6700-B Rockledge Drive
RoomXXXX
BETHESDA, MARYLAND 20892-76XX
USA

If non-mail carrier- use 20817 Zipcode

FAX: 301-XXX-XXXX Telephone: 301-XXX-XXXX E-mail: xxxxxx@nih.gov

The NIAID coordinator will ensure that the documents are entered into a grant terms of award tracking system and will forward them to the appropriate program officer in NIAID.

A. NIAID Review Process Prior to Study Initiation

The NIAID has a responsibility to ensure that mechanisms and procedures are in place to protect the safety of participants in NIAID-supported studies. Therefore, prior to patient accrual/participant enrollment, the grantee will provide the following (as applicable) for review and approval by the NIAID: Data Safety and Monitoring Board (DSMB) organization and responsibilities (see D. below); the clinical research protocol, including details of study design, proposed interventions, patient eligibility and exclusion criteria; plan for the management of side effects; procedures for assessing and reporting adverse events; site monitoring plan; the informed consent document, and documentation of IRB approval. To assist you in preparing these materials for submission, a checklist and other guidances are provided (ATTACHMENT 1). NIAID staff comments will be forwarded to the grantee within 3 (three) weeks of receipt of the above information. The grantee must address in writing all safety, regulatory, ethical, and conflict of interest concerns raised by NIAID staff to the satisfaction of the NIAID before patient accrual and participant enrollment can begin.

Clinical research projects involving the testing of new investigational therapeutics, vaccines or other medical interventions under a research protocol should be performed under an IND, unless otherwise agreed-upon by the NIAID and the Principal Investigator (PI).

B. Required Reporting

The NIAID is required to report the number and demographics of participants enrolled in NIAID-supported studies.

<u>Clinical Trials</u>. To aid the NIAID in fulfilling these reporting requirements, the grantee must complete the table below showing <u>cumulative accrual</u> information for each clinical trial protocol semi-annually. This submission should be made 6 (six) months after enrollment opens and each 6 (six) months thereafter for clinical trials.

<u>Clinical Studies</u>. For all other clinical studies, yearly submission of the table with the non-competitive grant renewal is required.

Current Accrual Information and Demographics of Subjects Enrolled in the Study

	American Indian or Alaskan Native	Asian or Pacific Islander	Black, not of Hispanic Origin	Hispanic	White, not of Hispanic Origin	Other or Unknown	Total
Female 0-20 years							
Female 21-above							
Male 0-20							
Male 21-above							
Total							

C. Time-sensitive Notification

To help ensure the safety of subjects enrolled in NIAID-funded studies, the following information must be sent to NIAID in a timely manner as specified in this section. The NIAID program officer must be informed of all major changes in the status of ongoing protocols, including:

- all amendments to the protocol
- termination of the protocol
- temporary suspension of the protocol
- any change in informed consent or IRB approval status
- temporary suspension or permanent termination of patient accrual
- any other problems or issues that could affect the human subjects in the studies.

Notification of any of the above changes must be made within three (3) **working days** by e-mail, followed by a signed letter cosigned by the Principal Investigator and the institutional business official, detailing the change of status notification to or from the local IRB.

IND studies: A copy of the seven-day telephone or facsimile safety reports sent to the FDA must be submitted to the NIAID Grants Coordinator within 24 hours of FDA notification.

IND studies: A copy of the fifteen-day written safety reports submitted to the FDA must be submitted to the NIAID Grants Coordinator within 24 hours of FDA notification.

In case of specific problems or issues, the NIAID program officer will contact the grantee within ten (10) **working days** (by e-mail or FAX), followed by an official letter to the Principal Investigator, with a copy to the institutions grants office, within thirty (30) calendar days to discuss appropriate actions.

D. Safety and Monitoring Issues, including multicenter trials and/or international sites:

1. Data and Safety Monitoring Board requirements:

Independent monitoring is essential for all clinical trials involving investigational drugs, devices or biologics and other clinical research perceived to involve more than a minimal risk (Minimal Risk: A risk is minimal where the probability and magnitude of harm or discomfort anticipated in the proposed research are not greater, in and of themselves, than those ordinarily encountered in daily life or during the performance of routine physical or psychological examinations or tests. For example, the risk of drawing a small amount of blood from a healthy individual for research purposes is no greater than the risk of doing so as part of routine physical examination). Decisions regarding the type of review committee to employ will be made jointly by the NIAID and the PI prior to study initiation. Discussions with the responsible NIAID Program Official regarding the appropriate safety monitoring will occur before patient enrollment may commence and include discussions about the appointment of:

- a. Independent Safety Monitor an individual physician who is independent of the study and available in real time to review and recommend appropriate action regarding adverse events and other safety issues;
- b. Data and Safety Monitoring Board (DSMB) an independent committee charged with reviewing safety and trial progress and providing advice with respect to study continuation, modification and/or termination. Decisions are made according to preset stopping rules.

The grantee may be required to use an established NIAID DSMB or to organize an independent DSMB. When the monitoring board is organized by the grantee, a description of the board, its operating procedures (including proposed meeting schedule and plan for review of adverse events) and roster and CV from all members must be submitted to and approved by the NIAID <u>prior</u> to study initiation. Additionally, the grantee will submit written summaries of all open sessions to the Grants Coordinator within **30** (thirty) days of meetings.

2. IRB Approval:

Annually, the grantee will submit to the NIAID documentation of current approval from the local IRB, including a copy of the current informed consent document submitted as part of the IRB package. Where there are other institutions involved in the research, the protocol must be approved by each institution's IRB and initial and annual documentation from these institutions must also be provided to the NIAID. For international sites, initial approval and annual documentation from the local IRB is required, along with approval from a National IRB if applicable.

3. Other: *To be determined on a case-by-case basis.*

ATTACHMENT 1 Clinical Research Information Report

Prior to protocol implementation, submit Attachment I to the following address:

TΕ	RMS OF AWARD FOR GRANTS COORDINATOR
(NI	AID staff member will be identified for each award)
	vision of
	00-B Rockledge Drive
	om
	THESDA, MARYLAND 20892-76xx
US	
	SedEx, UPS, etc.,- use 20817 Zipcode
	X: 301-xxx-xxxx ephone: 301-xxx-xxxx
	•
CH	nail: xxxxx@nih.gov
Da	te:
PH	ncipal Investigator: phone fax email
<u> </u>	pnone iax email
Uľ	ant #:
511	e Name:
Αc	ldress:
Stı	udy Title:
1.	Study Agents or Intervention(s):
	NA
	Note: Intervention includes both physical procedures by which data are gathered (for
	example, venipuncture) and manipulations of the subject or the subject's environment that are
	performed for research purposes.
	performed for research purposes.
2	Copy of the protocol:
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	Please provide a current, complete copy of the clinical/research protocol
	Please note that for the duration of the grant it is the responsibility of the grantee to notify the
	NIAID of subsequent protocol amendments before implementation and provide
	documentation.
3.	OPRR Assurance number:
4.	IND Submission to FDA:
	yes no NA
	· — — —
5.	Name and institution of IND holder:
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ATTACHMENT I

cont.

FDA IND Approval:												
yes	no l	Date:			ID number as	ssignment a	nd					
IND#:_		_										
Initial IRB Protocol Approval: yes no Date: attach all IRB documents Annual Review yes no Date: attach all IRB documents Recombinant DNA Advisory Committee Approval:												
yes Date: NA												
10. DSMB established: yes Standing NIAID DSMB (name of DSMB and NIAID contact person) no NA 11. Target Accrual and Demographics: Date												
	American Indian or Alaskan Native	Asian or Pacific Islander	Black, not of Hispanic Origin	Hispanic	White, not of Hispanic Origin	Other or Unknown	Total					
emale 20 vears												
emale -above												
ale 20												
ale -above												
	IND#: Initial IF yes Annual yes Recomb yes Standing (name o no NA Target A emale 20 years emale -above ale 20 ale	IND#:	IND#: Initial IRB Protocol Approval: yes no Date:_ Annual Review yes no Date:_ Recombinant DNA Advisory yes Date: NA DSMB established: yes Standing NIAID DSMB (name of DSMB and NIAID cono NA Target Accrual and Demograp American	yes no Date: attach copy comments if IND#: Initial IRB Protocol Approval: yes no Date: attach all I Annual Review yes no Date: attach Recombinant DNA Advisory Committee Appyes Date: NA DSMB established: yes Standing NIAID DSMB (name of DSMB and NIAID contact person) no NA Target Accrual and Demographics: American Indian or Asian or Black, not of Hispanic Native Islander Origin smale 20 years pale 20 years penale 20 years penale 20 ale 20 ale	yes no Date: attach copy of FDA IN comments if available IND#: Initial IRB Protocol Approval: yes no Date: attach all IRB docum Annual Review yes no Date: attach all IRB docum Annual Review yes no Date: attach all IRB docum Recombinant DNA Advisory Committee Approval: yes Date: NA DSMB established: yes Standing NIAID DSMB (name of DSMB and NIAID contact person) no NA Target Accrual and Demographics: Date American	yes no Date: attach copy of FDA IND number as comments if available IND#: Initial IRB Protocol Approval: yes no Date: attach all IRB documents Annual Review yes no Date: attach all IRB documents Recombinant DNA Advisory Committee Approval: yes Date: NA DSMB established: yes Standing NIAID DSMB_ (name of DSMB and NIAID contact person) no NA Target Accrual and Demographics: Date American Indian or Asian or Alaskan Pacific Native Islander Origin Hispanic Origin male 20 years alle	yes no Date: attach copy of FDA IND number assignment a comments if available IND#: Initial IRB Protocol Approval: yes no Date: attach all IRB documents Annual Review yes no Date: attach all IRB documents Recombinant DNA Advisory Committee Approval: yes Date: NA DSMB established: yes Standing NIAID DSMB (name of DSMB and NIAID contact person) no NA Target Accrual and Demographics: Date American Indian or Alaskan Pacific of Hispanic Origin Hispanic Origin Unknown male 20 years end ale 20 ale 2					

NA = not applicable

Total